REQUEST AND AUTHORIZATION FOR TDY TRAVEL OF DOD PERSONNEL (Reference: Joint Travel Regulations (JTR), Chapter 3) (Read Privacy Act Statement on back before completing form.)									L	1. DATE OF REQUEST (YYYYMMDD)	
			REQ	UEST FO	R OFF	ICIAL TRA	VEL			<u> </u>	
2. NAME (Last, Fir		AL SECUF						RADE/RATING			
5. LOCATION OF Your official lib	ON (PDS)			6. ORGANIZATIONAL ELEMENT			EMENT	7. DUTY PHONE NUMBER (Include Area Code)			
AC		ACTEDS,	D. TDY PURPOSE (See JTR, Appendix ACTEDS, Training Course Nat & Training Location				OX. NO. OF ding travel t	F TDY DAYS time)		b. PROCEED DATE (YYYYMMDD)	
11. ITINERARY From My Local of i.e. From Was	city or town thington, Dis	X VARIAT to the training trict of Colum	g city and	return to	my lo <b>k, Loui</b>	cal city or siana and	town. return t	to Was	hington, E	District of Columbia.	
12. TRANSPORTA	TION MODE										
a. COMMERCIAL		b. GOVE		<b>y</b> ==	ı	AL TRANSPO					
RAIL AIR	BUS SHIF		VEHICLE		CAR RENTAL	×	OTHER	RATE F	TELY OWNED CONVEYANCE (Check one)  PER MILE: \$0.360  ADVANTAGEOUS TO THE GOVERNMENT  MILEAGE REIMBURSEMENT AND PER DIEM IS		
LIMITED COMMOI									LIMITED TO C	CONSTRUCTIVE COST OF RRIER TRANSPORTATION AND DETERMINED AND TRAVEL TIME	
13. X a. PER	DIEM AUTHORIZ	ZED IN ACCORDA	ANCE WITH	JTR.	t	o. OTHER RA	TE OF PER	DIEM (S	Specify)		
14. ESTIMATED	COST									15. ADVANCE	
a. PER DIEM b. TRAVEL \$				c. OTHER			d. TOTA \$			AUTHORIZED \$	
16. REMARKS (USINSTRUCTION Blocks 1-7: you Block 8: enter Block 9: Enter Blocks 10a & b. the day you will Block 11: Use t INSTRUCTION 17. TRAVEL-REQU 19. ACCOUNTING SEE SECOND 1	complete the compl	MPLETING  dese blocks.  followed by the ALP ACT aining.  the example  UE ON SECC	a short to EDS FYO	title for to the second of the	the trai	ining cour stimate W variation RM 1610	se and it orksheet authoriz	ts locat t to obt	tion. tain the nu	umber of TDY days and	
20. AUTHORIZING/ORDER-ISSUING OFFICIAL (Title and signature)											
20. AUTHORIZING	6/ORDER-ISSU	ING OFFICIAL	(Title and s	ignature)			21.	DATE IS	SSUED (YYY	YMMDD)	

PRIVACY ACT STATEMENT (5 U.S.C. 552a)
<b>AUTHORITY</b> : 5 U.S.C. 5701, 5702, and E.O. 9397.
PRINCIPAL PURPOSE(S): Used for reviewing, approving, and accounting for official travel.
ROUTINE USE(S): None.
DISCLOSURE: Voluntary; however, failure to provide the requested information may delay or preclude timely authorization of your travel request.
16. REMARKS (Continued) (Use this space for special requirements, leave, excess baggage, accommodations, registration fees, etc.)
INSTRUCTIONS FOR COMPLETING DD FORM 1610:
Blocks 12a, b & c: a, Select the mode of transportation on your travel tickets. You can select more than one mode.  For example, if you take a train to the airport, check both rail and air blocks.
b, If you have tickets to travel obtained through Carlson or Sato do not use this section.
c, Do not check "car rental." ACTEDS will not pay for a rental car. You may select "taxi" and "other." If you elect "other," enter thirty-six cents [.36] in the rate per mile, and check "advantageous to the government."
Block 13a: Check the block, "per diem authorized in accordance with JTR."
Blocks 14a, b, c & d: Enter the appropriate amounts from the ACTEDS FY04 TDY Cost Estimate Worksheet. Check the total in Block 14d (a+b+c=d).
Block 15: Leave blank, or Contact the Army Library Program Office prior to entering any amount in this block.
Block 16: Enter the below without changes in block 16, remarks:  ACTEDS Funded: Rental car, in and around mileage, official telephone calls, and faxes not authorized. Traveler must have government issued credit card. Final reimbursement voucher (DD Form 1351-2) and claims will be submitted through the Army CIO/G-6 Human Capital Management Office for signature in block 18 within five working days of completion of travel. Furnish copies of DFAS Final Settlement Voucher to three below listed offices:  1) Army CIO/G-6 Human Capital Management (ATTN: Kimberly Crandall), 107 Army Pentagon, Washington, DC 20310-0107 (fax: 703-604-2963).  2) ODCS, G-1, Assistant G-1 for Civilian Personnel Policy (ATTN: DAPE-CP-PSR), Room 448, Hoffman I Building, 2461 Eisenhower Avenue, Alexandria, VA 22331-0300 (fax: 703-325-6523).  3) Office of the Army Librarian (ATTN: DAPE-PTT-LM), 300 Army Pentagon, Washington, DC 20310-0300 (fax: 703-428-1294).
Block 16: Enter one of the following statements: Traveler has Government Travel Card. Traveler has Government Travel Card and will use it to obtain cash.* Traveler does not have Government Travel Card. Traveler does not have Government Travel Card and advance is authorized.* * Contact ALP Office prior to entering this statement.
Block 16: Enter the below as necessary in block 16, remarks, after contacting the Army Library Program Office.  Leave in conjunction with TDY is authorized. [Full Name] will be on annual leave from to  [Full Name] will be on home leave from to  POV is authorized.  Highway tolls in,,, are authorized, not to exceed \$50.00.  Registration fee of \$ is authorized.  Actual lodging expenses are authorized, not to exceed% of per diem IAW JTR, volume II.
Block 17: Enter M. Ann Parham, Army Librarian, DFCR.
Block 18: Enter Jackie Rustigian - Director, Human Capital Directorate.
Blocks 19, 20, 21 & 22: These blocks will be completed by ALP.